

PART B - FEE(S) TRANSMITTAL

send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

| | | | | | P.O. Box 1450 Alexandria, Virginia 22313-1450 (571)-273-2885 | | | | | |
|--|--|---|---|---|--|--|---|--|--|--|
| INSTRUCTIONS: The appropriate. All further indicated unless correct maintenance fee notific | s form should be used r correspondence includi- ted below or directed of ations | for transmitting the ISS ing the Patent, advance herwise in Block 1, by | SUE FEE and PUBLIC orders and notification (a) specifying a new o | of mais | FEE (if requirements for the second s | nired). Bloo will be ma s; and/or (b | iks I through 5 siled to the current) indicating a sept | hould be completed where correspondence address as arate "FEE ADDRESS" for | | |
| CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) | | | | | Note: A certificate of mailing can only be used for domestic mailings of the Fec(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. | | | | | |
| 47670 | 47670 7590 10/25/2007 | | | | | | | | | |
| KELLEY DR' 400 ALTLANT STAMFORD, (| | Certificate of Mailing or Transmission I bereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. | | | | | | | | |
| | | | | Ste | ven J. M | gore, E | 1 /1. | (Depositor's mme) | | |
| | | | | _ = | X | -// | 200 | (Signature) | | |
| | | | | 22 | January | 8008 | | (Dete) | | |
| APPLICATION NO. FILING DATE | | FIRST NAMED INVE | | TOR | | ATTORNE | EY DOCKET NO. | CONFIRMATION NO. | | |
| 10/672,052 | 10/672.052 09/26/2003 | | Richard H. Selinfre | | nd | | 114.4B(US) | 7180 | | |
| APPUN. TYPE | SMALL ENTITY | ISSUE FEE DUE | PUBLICATION FEE D | UE PR | EV. PAID ISSU | E FEE T | OTAL FEE(S) DUE | DATE DUE | | |
| nonprovisional | YES | \$720 | \$300 | | \$0 | | 1607EN2 00000 | 01/25/2008 _{07 7005} | | |
| EXAM | INER | ART UNIT | CLASS-SUBCLASS | \neg | 01/23 | 1/2008 N | AGUYENS 00000 | 081 110404 1067205 | | |
| ANGEBRANNDT, MARTIN J | | 1795 | 430-270150 | J | 01 FC | C:2501 720.00 | | | | |
| Change of correspondence address or indication of "Fee Address" (3 | | | | 02 FC:1504 300.00 DA he petent front place list 8001 b. 00 DH KELLEY DRYE & | | | | | | |
| CFR 1.363). Change of corresp | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, so name will be printed. | | | | | | | | | |
| Address form PTO/SI "Fee Address" ind PTO/SB/47; Rev 03-6 Number is required. | | | | | | | | | | |
| | ND RESIDENCE DATA | | | ••• | If an and | | Gad balance sha da | current has been filed for | | |
| recordation as set fort | n in 37 CFK 3.11. Comp | letion of this form is NO | I a substitute for filing | *80 8551g | ninent. | | | Cuticist lies open litted for | | |
| (A) NAME OF ASSIG | (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | | | | |
| Verification 7 | fechnologies, In | nc. | Essex, CT | | | | • | | | |
| Icase check the appropri | iate assignee category or | categories (will not be pr | rinted on the patent) : | ☐ Indi | vidual 🖾 Co | rporation o | other private grou | up entity Government | | |
| a. The following fee(a) a Issue Fee | b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) | | | | | | | | | |
| Publication Fee (N | ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. | | | | | | | | | |
| Advance Order - A | The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 11-0404 (enclose an extra copy of this form). | | | | | | | | | |
| | tus (from status indicated s SMALL ENTITY status | • | ☐ b. Applicant is no l | | | | • | | | |
| OTE: The Issue Fee and nterest as shown by the r | Publication Fee (if requestroids of the United State | ired) will not be accepted as Patent and Trademark | d from anyone other that Office. | n the ap | plicant; a regi: | stered attorn | ncy or agent; or the | assignee or other party in | | |
| Authorized Signature | Steven J. Noo. | Youl | | ı | Date | January | 2008 | | | |
| Typed or printed name | Registration No. 35, 959 | | | | | | | | | |
| his collection of informs n application. Confident ubmitting the completed his form and/or suggestic lox 1450, Alexandria, Vi lexandria, Virginia 2231 Inder the Paperwork Red | ation is required by 37 Cliality is governed by 35 I application form to the ons for reducing this burnginia 22313-1450. DO 3-1450. Inction Act of 1995, no p. | FR 1.311. The information U.S.C. 122 and 37 CFR USPTO. Time will vary den, should be sent to the NOT SEND FEES OR (corons are required to res | in is required to obtain a 1.14. This collection is depending upon the im- e Chief Information OfficompLETED FORMS apond to a collection of | estimate dividual ficer, U.S TO TH | a benefit by the detailed to take 12 n case. Any cons. Patent and S ADDRESS. | ne public what the comments on Frademark (SEND TO | nich is to file (and lomplete, including the amount of time of time of the commissioner for the time of the commissioner for the time of time | by the USPTO to process) gathering, preparing, and expure to complete truent of Commerce, P.O. r Patents, P.O. Box 1450, | | |

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

OMB 0651-0033

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE





FACSIMILE TRANSMISSION

TO

Mail Stop ISSUE FEE

FIRM

USPTO

CITY

Alexandria, VA

FAX

571-273-2885

PHONE

NO. OF PAGES

2 (including this page)

DATE

January 22, 2008

KELLEY DRYE & WARREN LLP TWO STAMFORD PLAZA 281-TRESSER BOULEVARD STAMFORD, CONNECTICUT 06901-3229

> (203) 324-1400 FAX (203) 327-2689

MESSAGE:

Re: U.S. Serial No. 10/672,052

Dear Sir or Madam:

Enclosed please find an executed Fee Transmittal regarding the Notice of Allowance for the above-identified patent application.

Should you have any questions or require further information, please contact our office. Thank you for your attention to this matter.

Very truly yours,

FROM

Dacia N. Savoie

Intellectual Property Group

PHONE

(203) 351-8091

E-MAIL

dsavoie@kelleydrye.com

TIMEKEEPER ID

05911

CLIENT NO.

016819-0056; VTI-114.4B(US)

NEW YORK, NY WASHINGTON, DC TYSONS CORNER, VA CHICAGO, IL STAMFORD, CT PARSIPPANY, NJ BRUSSELS

AFFILIATE OFFICES

JAKARTA

MUMBAI

IF PROBLEMS OCCUR DURING TRANSMISSION PLEASE CALL (203) 324-1400.

The information contained in this facsimile message is intended for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient, or the employee or agent responsible for delivery to the intended recipient, you are hereby notified that any use, copying, disclosure or dissemination of this communication may be subject to legal restriction or sanction.